				Complete if Known		
Substitute for form 1449/PTO				Application Number	09/646,802	
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				First Named Inventor	Petteri Putkiranta	
INFORMATION DISCLOSURE				Group Art Unit	2617	
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(Use as many sheets as necessary)			צי)	Examiner Name	Huy C. Ho	
				Attorney Docket		
Sheet	1	of	1	Number	042933/321132	

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Examiner Initials*	Cite No.	<u>Document Number</u> Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear

Examiner Initials	Cite No.	Foreign Patent Document Country Code - Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translatior Attached
	1	JP 07-261661 A	10/13/1995	Takahara et al.		Abstract
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Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			
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<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.